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Medicare Part B provides coverage for many types of therapy services. This document serves as a guide to direct professionals to additional resources regarding rehabilitation therapy services, coverage requirements, payment systems, and points of contact for further information.

#### Medicare Therapy Highlights:

- Therapy Caps Status www.cms.hhs.gov/ TherapyServices/03\_therapycaps.asp#TopOfPage
- Therapy Caps Exception Process (CR 4364) www.cms.hhs.gov/Transmittals/
- CCI Edits Apply to All Therapy Providers (SE0545) - www.cms.hhs.gov/ MLNMattersArticles
- Outpatient Therapy Services Microsoft PowerPoint Presentation - Outpatient Therapy Caps - www.cms.hhs.gov/ TherapyServices/03\_therapycaps.asp#TopOfPage
- Therapy Policies Microsoft PowerPoint Presentation - www.cms.hhs.gov/ TherapyServices/

#### **Therapy Provider Contacts**

The Medicare contractor who pays your claims is the best source of answers to specific Medicare questions. Contractors are Carriers, Intermediaries<sup>1</sup>, or Program Safeguard Contractors who interpret Medicare laws, develop local policies, and educate providers. Please use the CMS Contact Information Directory, available at <a href="https://www.cms.hhs.gov/apps/contacts/default.asp">www.cms.hhs.gov/apps/contacts/default.asp</a>, to locate websites and toll-free phone numbers for contractors' local coverage policies and other general instructions.

If you have difficulty communicating with your contractor, please use the Regional Office Overview, available at <a href="https://www.cms.hhs.gov/RegionalOffices/">www.cms.hhs.gov/RegionalOffices/</a>, to identify the CMS Regional Office servicing your area of operations and contact them for assistance.

# CMS Regulations & Program Guidance

For specific Therapy Regulations and Guidance, please refer to the CMS Regulations & Program Guidance web page at <a href="https://www.cms.hhs.gov/home/regsguidance.asp">www.cms.hhs.gov/home/regsguidance.asp</a> on the CMS website. The following websites also provide additional information:

- Therapy Services www.cms.hhs.gov/ TherapyServices/
- Medicare Benefits Policy Manual (Chapter 15) www.cms.hhs.gov/manuals/Downloads/ bp102c15.pdf

- Medicare Claims Processing Manual (Chapter 5) - www.cms.hhs.gov/manuals/ downloads/clm104c05.pdf
- Program Transmittals www.cms.hhs.gov/ Transmittals/
- Quarterly Provider Updates www.cms.hhs. gov/QuarterlyProviderUpdates/

## **Outpatient Therapy Services**

Please refer to the 11 Part B Billing Scenarios for PTs and OTs at <a href="https://www.cms.hhs.gov/TherapyServices/">www.cms.hhs.gov/TherapyServices/</a> on the CMS website. These scenarios are designed to clarify existing therapy policy and to provide guidance on current Medicare Part B billing issues relevant to Physical Therapists (PTs), Occupational Therapists (OTs), and Speech-Language Pathologists (SLPs) and to the services they provide. For additional information, please refer to the following websites:

- Physician Fee Schedule (PFS) www.cms.hhs. gov/PhysicianFeeSched/01 overview.asp
- Physician Fee Schedule Look-Up www.cms.hhs.gov/apps/pfslookup/
- National Correct Coding Initiatives Edits www.cms.hhs.gov/NationalCorrectCodInitEd/

#### **Provider Enrollment**

Please refer to the Medicare Provider-Supplier Enrollment web page at www.cms.hhs.gov/ MedicareProviderSupEnroll/ for Medicare enrollment information for institutional providers, physicians, practitioners, and suppliers of medical and health services. For additional information, please refer to the following websites:

- Provider Enrollment Forms www.cms.hhs.gov/MedicareProviderSupEnroll/0 3 EnrollmentApplications.asp#TopOfPage
- Provider-Supplier Enrollment Contacts www.cms.hhs.gov/MedicareProviderSupEnroll/ PSEC/list.asp

# **Medicare Payment Systems**

For specific payment system information, please refer to the following websites:

- Ambulatory Surgical Centers www.cms.hhs. gov/center/asc.asp
- Critical Access Hospitals www.cms.hhs.gov/ center/cah.asp
- Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) www.cms.hhs.gov/center/dme.asp

<sup>&</sup>lt;sup>1</sup> Section 911 of the Medicare, Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) enacted numerous contracting reforms. A key aspect of these reforms is that Medicare will begin integrating Fiscal Intermediaries (FI) and Carriers into a new single authority, called a Medicare Administrative Contractor (MAC). As of October 1, 2005, new Medicare Contractors are called MACs. Also, from October 2004 through October 2011, all existing FI and Carrier contracts will be transitioned into MAC contracts, using competitive procedures. Providers may access the most current MCR information to determine the impact of these changes at www.cms.hhs.gov/MedicareContractingReform/ on the CMS website.





- Home Health Agencies www.cms.hhs.gov/center/hha.asp
- Hospice www.cms.hhs.gov/center/hospice.asp
- Hospitals www.cms.hhs.gov/center/hospital.asp
- Physicians www.cms.hhs.gov/center/physician.asp
- Skilled Nursing Facilities www.cms.hhs.gov/center/snf.asp
- Other Provider Types www.cms.hhs.gov/center/ provider.asp

#### Therapy-Related Outreach and Education

To access the following learning resources and products, please refer to www.cms.hhs.gov/MLNProducts on the CMS website.

- Complying with Medicare Secondary Payer Requirements
- Medicare Enrollment for Institutional Providers
- Medicare Resident & New Physician Guide
- Reference Guide for Medicare Institutional Provider Billers (coming soon)
- Reference Guide for Medicare Physician & Supplier Billers
- The Medicare Appeals Process: Five Levels to Protect Physicians and Other Suppliers
- The Medicare Medical Review Program
- Understanding the Remittance Advice: A Guide for Medicare Providers, Physicians, Suppliers, and Billers
- What Doctors Need to Know About the Advance Beneficiary Notices (ABN)
- What Physicians and Other Suppliers Should Know About Medicare Overpayments
- When Medicare Is the Primary Payer

# Therapy Studies and Reports – Policy and Utilization

To review the following therapy studies and reports, please refer to www.cms.hhs.gov/TherapyServices/SAR/list.asp on the CMS website.

### **CMS Reports to Congress**

- Physical Therapy Assistants, November 2004
- Utilization and Alternatives, November 2004

#### **CMS Contracted Therapy Studies/Reports**

- AdvanceMed Costliest Report (ZIP 1.5MB), November 2004
- AdvanceMed Model Report (ZIP 1.3MB), November 2004
- AdvanceMed Edit Report (ZIP 1MB), November 2004
- AdvanceMed Project Report (PDF 314Kb), November 2004
- DynCorp Report Outpatient Therapy Utilization, September 2002
- Urban Institute Report PTA Supervision, August 2002
- Urban Institute Report Impact (Utilization), September 2001
- Urban Institute Report Background and Policy Issues, September 2000



# **Therapy Professional Association Contacts**

To contact one of the therapy professional associations, please refer to the following websites:

- American Occupational Therapy Association (AOTA) www.aota.org/
- American Physical Therapy Association (APTA) www.apta.org/AM/Template.cfm?Section=Home
- American Speech-Language-Hearing Association (ASHA) - www.asha.org/default.htm

**The Medicare Learning Network (MLN)** is the brand name for official CMS educational products and information for Medicare fee-for-service providers. For additional information visit the Medicare Learning Network's web page at www.cms.hhs.gov/MLNGenInfo on the CMS website.